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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN **CLAIMS AS FILED - PART I** SMALL ÉNTITY OR SMALL ENTITY (Column 2) (Column 1) NUMBER EXTRA FOR NUMBER FILED RATE FEE RATE FEE **BASIC FEE** _{\$} 355 OR S (37 CFR 1.16(a)) TOTAL CLAIMS 15 minus 20 = 0 OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS 2 minus 3 = 0 OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 355 OR TOTAL TOTAL If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 3) (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT 1 PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column I) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI- $\mathbf{\alpha}$ REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(e)) Minus = OR Independent Minus OR (37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT, FEE ADDIT FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR OR Total (37 CFR 1.16(c)) ** Minus OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT, FEE ADDIT, FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. This will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.